

Homeland Security Investigations

[REDACTED]
Wilmington, DE 19801



**Homeland
Security**

Cover Sheet

Date October 13, 2015

To: Time Warner Cable
Subpoena Compliance Team
Custodian of Records
[REDACTED]
[REDACTED]

Electronic Service Methods:

Fax: [REDACTED]

E-Mail: [REDACTED]

From: Patrick M. McCall

Phone: [REDACTED]

Urgent Action Concurrence FYI

Number of pages including cover: 4

Comments:

Attached is summons #: ICE-HSI-WM-2016-00005.

Please respond by October 20, 2015.

*****CHILD EXPLOITATION INVESTIGATION *****

DO NOT NOTIFY SUBSCRIBER. WILL IMPEDE ONGOING CRIMINAL INVESTIGATION.

<p>1. To (Name, Address, City, State, Zip Code) Time Warner Cable Subpoena Compliance Team Custodian of Records [REDACTED]</p>	<p>DEPARTMENT OF HOMELAND SECURITY SUMMONS to Appear and/or Produce Records 19 U.S.C. § 1509</p>
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Summons Number ICE-HSI-WM-2016-00005

By the service of this summons upon you, **YOU ARE HEREBY SUMMONED AND REQUIRED TO:**

(A) **APPEAR** before the U.S. Customs and Border Protection (CBP) Officer or U.S. Immigration and Customs Enforcement (ICE) Special Agent named in Block 2 at the place, date and time indicated to testify and give information.

(B) **PRODUCE** the records (including statements, declarations, and other documents) indicated in Block 3 before the CBP Officer or ICE Special Agent named in Block 2 at the place, date and time indicated.

Your testimony and/or production of the indicated records is required in connection with an investigation or inquiry to ascertain the correctness of entries, to determine the liability for duties, taxes, fines, penalties, or forfeitures, and/or to ensure compliance with the laws or regulations administered by CBP and ICE.

Failure to comply with this summons will render you liable to proceedings in a U.S. District Court to enforce compliance with this summons as well as other sanctions.

<p>2. (A) CBP Officer or ICE Special Agent before whom you are required to appear</p> <p>Name Patrick M. McCall Title Special Agent Address [REDACTED] Wilmington, DE 19801 Telephone Number [REDACTED] Fax Number [REDACTED]</p>	<p>(B) Date October 20, 2015 (C) Time 9:00 AM</p>
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3. Records required to be produced for inspection

Please see attached continuation page.

You are requested not to disclose the existence of this summons for an indefinite period of time. Any such disclosure will impede this investigation and thereby interfere with the enforcement of federal law.

Issued under authority of section 509, Tariff Act of 1930, as amended by Pub. L. No. 95-410 (19 U.S.C. § 1509); 44 F.R. 2217; Homeland Security Act of 2002

<p>4. Name of person authorized to serve this summons or any other CBP Officer or ICE Special Agent Patrick M. McCall</p>	<p>5. Date of issue OCT 13 2015 By  (Signature)</p>
<p>6. Name, title, address and telephone number of person issuing this summons John P. Kelleghan Special Agent in Charge Name [REDACTED] Title [REDACTED] Address [REDACTED] Telephone Number [REDACTED] Philadelphia, PA 19106</p>	



If you have any questions regarding this summons, contact the CBP Officer or ICE Special Agent identified in Block 2.

CERTIFICATE OF SERVICE AND ACKNOWLEDGMENT OF RECEIPT

A. CERTIFICATE OF SERVICE OF SUMMONS		
I certify that I served the summons on the front of this form as follows:		
<input type="checkbox"/> I delivered a copy of the summons to the person to whom it was directed, as follows:	Address or Location	Date
		Time <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
<input type="checkbox"/> (For corporations, partnerships, and unincorporated associations which may be sued under a common name) <input type="checkbox"/> I delivered a copy of the summons to an officer, managing or general agent, or agent authorized to accept service of process as follows:	Address or Location	Date
		Time <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Name of person to whom the summons was delivered		
Signature		
Title		Date

B. ACKNOWLEDGMENT OF RECEIPT		
I acknowledge receipt of a copy of the summons on the front of this form.		
Signature		
Title		Date
		Time <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

1. To (Name, Address, City, State, Zip Code) Time Warner Cable Subpoena Compliance Team Custodian of Records 13820 Sunrise Valley Drive Herndon, VA 20171	DEPARTMENT OF HOMELAND SECURITY SUMMONS (Continuation) to Appear and/or Produce Records 19 U.S.C. § 1509
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Summons Number ICE-HSI-WM-2016-00005

3. Records required to be produced for inspection (continued)

Attachment:

All customer or subscriber account information for any or all accounts registered to or associated with the Internet Service Protocol (IP) Address 104.175.141.234 on or about October 7, 2015 at 10:07 P.M. EST (GMT-0400 EST).

For each such account the information shall include the following:

- All Names, Addresses, Screen Names, Emails address and telephone numbers of all users, customers or subscribers.
- Connection records or records of session times and durations for all accounts.
- The location (address) of each account.
- Length of service (including start date) and types of service utilized.
- Telephone or instrument number or other subscriber number or identity, including any temporarily assigned network address
- Means and source of payment for such service (including any credit card or account number
- IP address and connectivity

Please email the requested information to [REDACTED] or fax to [REDACTED] to the attention of Special Agent Patrick M. McCall

Method of Response:

Preferred:

Return the requested records in a data file format such as ".XLS", ".CSV", ".TXT", ".TIF", or ".PDF". The data file(s) should be delivered via e-mail to Special Agent Patrick M. McCall at Pat.McCall@ice.dhs.gov.

NOTE: The ICE e-mail system limits incoming messages containing file attachments to 10 MB. For larger files send the summons response in multiple e-mail messages.

Alternates:

The records may be supplied in a file format on a CD-R. If the records are not available in data file format, paper documents will be accepted. The records should be delivered to Special Agent Patrick M. McCall at U.S. Immigration and Customs Enforcement, [REDACTED] Wilmington, DE 19801.

If you have questions, please contact Special Agent Patrick M. McCall at [REDACTED]

You are requested not to disclose the existence of this summons for an indefinite period of time. Any such disclosure will impede this investigation and thereby interfere with the enforcement of federal law.

End of Document

Appendix A – Law Enforcement Emergency/Life Threatening Request Form This LEA Life Threatening Request Form is included here for informational purposes. A standalone Form is located on the Security Operations Center SharePoint site or from the Subpoena Team link.

Law Enforcement Emergency/Life-Threatening Subscriber Information Request Form

Please complete this form whenever your agency requires Time Warner Cable's assistance in obtaining subscriber data on an expedited basis in connection with an emergency request involving a life-threatening situation. See 18 U.S.C. § 2702(b) or § 2702(c) for the legal requirements associated with these types of requests.

Please answer each of the following:

1). Does this emergency involve immediate danger of death or serious physical injury to any person?

Yes No

(If you answered "No," please contact us at 703-345-3422 during regular business hours for assistance)

2). Briefly describe the nature of the emergency or threat: * CHILD AT RISK *

SUBJECT POSTING PRODUCED IMAGES OF CHILD PORNOGRAPHY
TO INTERNET CHAT ROOM. IMAGES INVOLVE AN INFANT

3). What data are you seeking from Time Warner Cable in connection with this request (please be specific, e.g. subscriber name, address and phone number):

4). What data are you providing to help us locate responsive subscriber information:

Subscriber Name: _____

Address: _____

IP Address: 104.175.141.234 Date/Time/TZ: 10:07 PM EST (GMT-0400)

IP Address: _____ Date/Time/TZ: 10/7/15 -

IP Address: _____ Date/Time/TZ: _____

Email Address: _____ MAC Address: _____

Subscriber TN: _____ Call Detail Records (CDRs) Direction: _____ Incoming _____ Outgoing

Call Detail Records (CDRs): Start Date: _____ (YYMMDD HH:MM:SS) End Date: _____ (YYMMDD HH:MM:SS)

(Any request involving an IP address must include the date, time and time zone on which the IP was in use):

5) Law Enforcement Agency Information:

Requestor's Name & Title: Patrick M. McCall LEA Name: SPECIAL AGENT

LEA Address: [REDACTED], WILM, DEL

Requestor's Phone #: [REDACTED] Fax #: [REDACTED] Mobile #: [REDACTED]

Supervisor's Name & Title: Jonathan Freee Phone #: [REDACTED]

Agency Main-Publicly Listed Phone #: [REDACTED] Agency Website: [REDACTED]

Patrick M. McCall S/A 10/13/15

Officer/Agent's Signature

Date